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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		<b>Docket Number (Optional)</b> BAYER-0015-P03
In re Application of Jacques DUMAS et al.		
Application Number 09/777,920		Filed February 7, 2001
INHIBITION OF RAF KINASE USING QUINOLYL, For ISOQUINOLYL OR PYRIDYL UREAS		
Group Art Unit 1625	Examiner Rita J. Desai	
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <p><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) <span style="float: right;">\$130.00</span></p> <p><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) <span style="float: right;">\$ _____</span></p> <p><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) <span style="float: right;">\$ _____</span></p> <p><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) <span style="float: right;">\$ _____</span></p> <p><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) <span style="float: right;">\$ _____</span></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-3402</u>.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</p> <p>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p>Registration number if acting under 37 CFR 1.34(a). _____.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p><u>November 3, 2008</u> Date</p> <p><u><i>Richard J. Traverso</i></u> Signature</p> <p><u>Richard J. Traverso, Reg. No. 30,595</u> Typed or printed name</p> <p>I hereby certify that this correspondence is being deposited with the U.S. Postal Services as First Class Mail in an envelope addressed to Commissioner for Patents, Alexandria, VA 22313 On: <u>November 3, 2008</u> Name: <u>Richard J. Traverso</u></p> <p>SIGNATURE <u><i>Richard J. Traverso</i></u></p>		

**CERTIFICATE OF MAILING**

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I hereby certify that this correspondence is being deposited with the U.S. Postal Services as First Class Mail in an envelope addressed to: Commissioner of Patents, P O Box 1450, Alexandria, VA 22313-1450 on: Nov 3 2008  
Name: Richard J. Traverso  
Signature: *Richard J. Traverso*